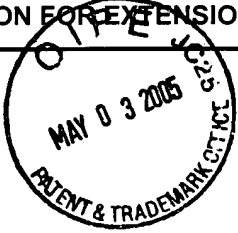
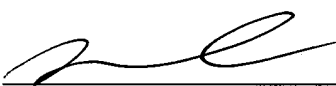
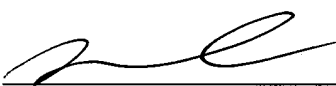
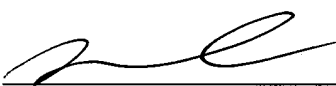


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 33216 M 038.1				
						
			In re Application of Noboru MASUDA, et al.			
			Application Number 10/617,865	Filed July 14, 2003		
			For Intermittent Coating Apparatus and Intermittent Coating Method			
Art Unit 1762		Examiner Frederick John PARKER				
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <p><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) \$120.00</p> <p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) \$ _____</p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) \$ _____</p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) \$ _____</p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) \$ _____</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$120. is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-4300.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number 23,263</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table border="0" style="width: 100%;"><tr><td style="width: 50%; text-align: center;"><u>May 3, 2005</u> Date</td><td style="width: 50%; text-align: center;"> Signature</td></tr><tr><td style="text-align: center;"><u>202 263 4300</u> Telephone Number</td><td style="text-align: center;"><u>Michael A. Makuch</u> Typed or printed name</td></tr></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>			<u>May 3, 2005</u> Date	 Signature	<u>202 263 4300</u> Telephone Number	<u>Michael A. Makuch</u> Typed or printed name
<u>May 3, 2005</u> Date	 Signature					
<u>202 263 4300</u> Telephone Number	<u>Michael A. Makuch</u> Typed or printed name					

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